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SECTION

Rocky Mountain Spotted Fever

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Rocky Mountain spotted fever, or "tick fever," is an acute disease transmitted to man by *infected* wood ticks. Originally, the disease was believed to be limited to the Rocky Mountain region of the United States—hence the name "Rocky Mountain spotted fever." Since then it has appeared in practically every part of the country. The Rocky Mountain States, the Pacific States, and the Atlantic States seem to have the great majority of the reported cases of this disease.

Most ticks are harmless. However, as many as one tick in 300 may carry in its body the germs of Rocky Mountain spotted fever. There is no way to tell an infected tick from a harmless one except by long, expensive laboratory tests. To be safe, treat every tick as if it were infected.

PREVENTION

Ticks crawl about on a person for some time before selecting a place to bite. Even after attaching itself and starting to feed, the tick does not transmit the germ for several hours—sometimes as many as six or eight hours. Safety, therefore, depends upon careful and frequent body inspections while in a tick area. Hikers can watch each other through the day, particularly for ticks crawling about the hairline of the neck. Everyone whose activity takes him into tick-infested land should make a thorough inspection, with clothes off, twice a day, giving special attention to the hairy parts of the body. Children playing in woods or brush where there are ticks should be undressed and inspected afterward—not forgetting their scalps.

HOW TO REMOVE A TICK

Do not crush a tick in removing it—a crushed, infected tick smeared on your skin can infect you. When the head is imbedded, a tick is hard to pull off. Take it off with eyebrow tweezers, a piece of paper or cloth, or wear rubber gloves. There is no truth in the old saying that a tick's head goes in spirally and must be unscrewed to remove. Paint the bite with iodine. Wash your hands, tweezers, and rubber gloves well with soap and water, or rinse your hands and tweezers in alcohol.

IF YOU HAVE A DOG

If you have a dog, use the same careful method for removing ticks from his hide. Dogs which run at large in a tick country often collect ticks and bring them home to the family. Danger will be lessened by keeping the dog out of the house during the tick season. The safest procedure for dog owners is to have all members of the family vaccinated against Rocky Mountain spotted fever *early every spring before the tick season starts.*

VACCINATION AGAINST ROCKY MOUNTAIN SPOTTED FEVER

Vaccination gives protection in two ways. If you are vaccinated before the tick season, you will be *less likely to get the disease*; and too, will be in much *less danger of having a severe case* if you do get infected. Rocky Mountain spotted fever vaccination does not give 100 percent protection the way smallpox vaccination does. It is for this reason that vaccinated persons should continue to watch out for ticks and use care in removing any that are found.

VACCINES

Two types of vaccine effective against Rocky Mountain spotted fever have been discovered and perfected by the National Institute of Health. One is prepared from infected ticks, the other from infected fertile hen's eggs. *The vaccine made from fertile hen's eggs must never be given to anyone who is allergic or sensitive to hen's eggs or to chickens.* Such persons should be given the tick vaccine. If this is not available, they should not be vaccinated.

The vaccine is probably of no value when administered *after* the infected tick has fed. It should be given at least ten days before a person expects to be exposed to ticks. That is why it is suggested that early spring *before the tick season starts* is the best time to be vaccinated.

Your family doctor can get the vaccine from any one of the following sources: Your State or local health department; The National Institute of Health, United States Public Health Service, Bethesda, Maryland; the Rocky Mountain Laboratory of the United States Public Health Service, Hamilton, Montana. There is no charge for the vaccine to the private physician or the health department. *Since the vaccine is available only in limited quantities*, it is reserved for people in areas known to be infested, and for those whose activities give them the greatest exposure.

When you find a tick on your body, there is no way for you to know if it is infected. Laboratory tests can be made, but would be of no value because, if the tick has infected you, the disease will develop before the laboratory tests can be completed.

SYMPTOMS

The first symptoms of Rocky Mountain spotted fever appear in from 4 to 12 days after the tick bite. The attack may come on suddenly with a chill, rapid rise in temperature, severe headache, restlessness, and insomnia. About 3 to 4 days after the fever begins, a skin rash appears. The rash is pinkish in color and individual spots are small and distinct. It usually breaks out first on the arms and legs, especially around the wrists and ankles. Later, it may spread over the entire body including the face, soles, and palms. The patient suffers chiefly from pain in his head. He is often restless and may become delirious. *Rocky Mountain spotted fever is a serious illness. A doctor should be called at the first appearance of symptoms.*

TREATMENT

The National Institute of Health recently developed an immune rabbit serum for use in the treatment of Rocky Mountain spotted fever. Before that, nothing was available in the way of special treatment of this disease. To be of value, the serum should be given as early as possible in the course of the illness, preferably before the rash has been present for three days.

The serum for the treatment of spotted fever is produced commercially and can be obtained by your physician by purchase from the manufacturer.

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